24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
DCCC	
	C C00000935
Check if 24-hour report	on M = M / D = D / Y = Y = Y
Full Name of Payee	Date of Public Distribution/Dissemination
AL Media, LLC Date of Dissemination: 10/12/16	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 222 West Ontario West	10 12 2016
Suite 600	Amount
City State Zip Code	15400.00
Chicago IL 60654	Transaction ID : SE-951427 Date of Disbursement or Obligation
Purpose of Expenditure Media Production Category/ Type 004	10 12 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Office	e Sought: House District: 01
Blum, Rodney, Leland, , Oppose	President Senate State: IA
Calendar Year-To-Date Per Election for Office Sought Disbut 2016	rsement For: Primary General Other (specify) ▶
Full Name of Payee Precision Network, LLC	Date of Public Distribution/Dissemination
Date of Dissemination: 10/12/16 Mailing Address 1140 Connecticut Ave NW	10 12 2016
Suite 800	Amount
City State Zip Code	500.00
Washington DC 20036	Transaction ID : SE-951430 Date of Disbursement or Obligation
Purpose of Expenditure Media Production Category/ Type 004	10 12 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Office	e Sought: X House District: 24
Katko, John, M., ,	President Senate State: NY
Calendar Year-To-Date Per Election for Office Sought Disbut 2016	orsement For: Primary
(a) SUBTOTAL of Itemized Independent Expenditures	15900.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not may with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	•
Ward, Kelly, C., , [Electronically Filed] Date Signature	0 13 2016
Oignaturo	

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 2 OF 3 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
DCCC	C C00000935
Check if 24-hour report 48-hour report New report Amends report file	ed on Mam / Dad / Yayayay
Full Name of Payee Precision Network, LLC Date of Dissemination: 10/12/16	Date of Public Distribution/Dissemination
Mailing Address 1140 Connecticut Ave, NW	10
Suite 800 City State Zip Code	5000.00
Washington DC 20036 Purpose of Expenditure	Transaction ID : SE-951429 Date of Disbursement or Obligation
Media Production Category/ Type 004	10 / 12 / 2016
Hordy Crosent	ice Sought: X House District: 04
· Oppose	President Senate State: NV sbursement For: Primary General
Per Election for Office Sought 2026113.65	Other (specify) ▶
Full Name of Payee Precision Network, LLC Date of Dissemination: 10/12/16	Date of Public Distribution/Dissemination
Mailing Address 1140 Connecticut Ave, NW	10 12 2016 Amount
Suite 800	
City State Zip Code Washington DC 20036	17000.00 Transaction ID : SE-951431
Purpose of Expenditure Media Buy Category/ Type 004	Date of Disbursement or Obligation
	fice Sought: House District: 04
Hardy, Cresent, , ,	President Senate State: NV
Calendar Year-To-Date Per Election for Office Sought Dis 2026113.65	sbursement For: Primary
(a) SUBTOTAL of Itemized Independent Expenditures	22000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not with, or at the request or suggestion of, any candidate or authorized committee or agent of eith party committee) any political party committee or its agent.	
Ward, Kelly, C., , [Electronically Filed] Date	10 13 2016

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	DITORLS	PAGE 3 OF 3 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
DCCC		C C00000935
Check if 24-hour report X 48-hour report New	report Amends report fi	led on Mam / Dad / Yayayay
Full Name of Payee		Date of Public Distribution/Dissemination
Buying Time, LLC Date of Dissemination: 10/11/16		10 11 2016
Mailing Address 650 Massachusetts Avenue, NW Suite 210		Amount
City State	Zip Code	57500.00
Washington DC	20001	57500.00 Transaction ID : SE-951439 Date of Disbursement or Obligation
Purpose of Expenditure Media Buy	Category/ Type 004	10 11 2016
Name of Federal Candidate	Support Of	ffice Sought: House District: 00
Trump, Donald, J., ,	X Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought		sbursement For: Primary x General 116 Other (specify) ▶
Full Name of Payee		Date of Public Distribution/Dissemination
Screen Strategies Media, LLC Date of Dissemination: 10/12/16		10 12 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 11150 Fairfax Blvd		Amount
Suite 505		
City State Fairfax VA	Zip Code 22030	74632.00 Transaction ID : SE-951438
Purpose of Expenditure Media Buy	Category/ Type 004	Date of Disbursement or Obligation
Name of Federal Candidate	Support O	ffice Sought: House District: 00
Trump, Donald, J., ,	X Oppose	X President Senate State:
Calendar Year-To-Date Per Election for Office Sought		isbursement For: Primary
(a) SUBTOTAL of Itemized Independent Expenditures	·····	132132.00
(b) SUBTOTAL of Unitemized Independent Expenditures	······	
		7 7 7
(c) TOTAL Independent Expenditures	······	170032.00
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.		
Ward, Kelly, C., , [Elect.] Signature	ronically Filed] Date	10 13 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
g		